

[illegible]

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Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				<i>Complete if Known</i>	
				Application Number	10/766,457
				Filing Date	January 28, 2004
				First Named Inventor	Hom et al.
				Group Art Unit	TBD / 655
				Examiner Name	TBD
				Attorney Docket Number	RDID 03021 US (WP 21395)

[illegible]

Examiner Signature	<i>R Gitomen</i>	Date Considered	<i>6/15/06</i>
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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Sheet

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of

1

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